

PROVIDER Update



Health Net
Access™

NEWS & ANNOUNCEMENTS | NOVEMBER 1, 2016 | UPDATE 16-707 | 4 PAGES

Health Net Access Transition Reminder

As a reminder, on March 24, 2016, Centene acquired Health Net, including the Health Net Access (HNA) plan. HNA providers can refer to the provider updates referenced in this update for comprehensive information regarding these changes.

CLAIMS PROCESSING

The following updates to claims processing were implemented, effective July 1, 2016. Additional information regarding these updates was communicated in provider update 16-320, *New Claims Processes for Health Net Access Transition*, distributed on June 1, 2016.

Claims Payments

You will receive payments from HNA for dates of service (DOS) prior to June 30, 2016. You will receive payments from Centene for DOS July 1, 2016, and beyond. HNA is anticipating an 18-month period of time where you may receive payments from both entities depending on the DOS.

Optical Character Recognition (OCR) of Claim Forms

The only acceptable claim forms are those printed in Flint OCR Red, J6983, (or exact match) ink. Providers may continue the use of HNA's secure online portal for electronic claims submissions by visiting www.healthnetaccess.com.

DRG Billing Changes

HNA is conducting check-run sample reviews for providers with inpatient claims using targeted diagnosis codes to ensure that claims processes related to DRG are followed.

New Claims Edits

Additional claims edits have been added in order to reduce current HNA encounters issues. Claims that do not meet the claims edit requirements will be considered non-compliant. HNA no longer accepts non-compliant claims.

PRIOR AUTHORIZATION PROCESSES

The following changes regarding prior authorization requirements and the authorization tool were implemented on July 1, 2016. Additional information regarding these changes was communicated in provider update 16-319, *Prior Authorization Process, Website Re-Registration and Vision Vendor Changes*, distributed on June 1, 2016.

THIS UPDATE APPLIES TO
**HEALTH NET ACCESS
(AHCCCS) PROVIDERS:**

- Physicians
- Medical Groups/IPAs
- Hospitals
- Ancillary Providers

PROVIDER SERVICES

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1-888-788-4408
www.healthnet.com

PROVIDER DISPUTES

Health Net Access Provider Disputes
1230 W Washington Street, Ste. 401
Tempe, AZ 85281

STATE FAIR HEARINGS

Health Net Access Provider State
Fair Hearings
1230 W Washington Street, Ste. 401
Tempe, AZ 85281

NATIONAL PROVIDER COMMUNICATIONS

provider.communications@
healthnet.com
fax 1-800-937-6086

Prior Authorization Requirement Changes

Changes were made to the HNA prior authorization requirements, as described in provider update 16-319. The current HNA prior authorization requirements can be accessed on the secure Web portal at www.healthnetaccess.com.

Online Authorization Tool

HNA providers can utilize an online authorization tool to help determine whether services require plan prior authorization. To access the online tool, visit www.healthnetaccess.com and select *Pre-Auth Check*. If you are uncertain whether prior authorization is needed, submit a request for an accurate response by selecting the option "To submit a prior authorization".

WEBSITE AND PROVIDER WEB PORTAL CHANGES

Effective July 1, 2016, the HNA website has a new look; however, providers can still access the secure Web portal utilizing the same link at www.healthnetaccess.com. All HNA providers will need to re-register for access to the online secure portal. To re-register for Web portal access, visit www.healthnetaccess.com.

ENVOLVE VISION VENDOR

Effective June 1, 2016, Envolve Benefit Options (Envolve) is the HNA vision vendor. Members or their representatives can contact HNA's member services department at 1-888-788-4408 for assistance with benefits or locating a vision provider.

ADDITIONAL INFORMATION

Providers are encouraged to access the provider portal online at provider.healthnet.com for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact the Health Net Access Provider Services Center at 1-888-788-4408.

Take Advantage of Health Net's Online Tools!

Visit Health Net's provider portal directly at provider.healthnet.com. Once logged in, quickly find and verify member eligibility, copayments, prior authorization requirements, and other plan details for a selected member under *Patient Information*. View his or her transaction status under *Patient History* to find what you need, when you need it.